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September 11, 2003



UTILITY PATENT APPLICATION TRANSMITTAL (new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket Number: KCC 4953 (K-C 18,752) First Named Inventor: Duane G. Krzysik LOTIONED TISSUE PRODUCT WITH IMPROVED STABILITY

Express Mail Label Number: EV 327053711 US

TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

APPLICATION ELEMENTS

- 1. [X]Fee Transmittal Form (original and duplicate) . 2.
- Applicant claims small entity status 3. [X]
- Specification [Total Pages 39]
- [] Drawings [Total Sheets ___] 5.
- Oath or Declaration [Total Pages __]
 - [] Newly executed (original or copy) [] New (unexecuted)
 - b. [] Copy from a prior application (for continuation/divisional with Box 19 completed)
 - [] DELETION OF INVENTOR(s) Signed statement attached deleting inventor(s) named in prior application.

Th co co	he enopy onsi	Incorporation By Reference (useable if Box 5b is marked) (useable if Box 5b is marked) ntire disclosure of the prior application, from which a of the oath or declaration is supplied under Box 5b, is dered as being part of the disclosure of the panying application and is hereby incorporated by ence therein.
		Application Data Sheet
		CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
9. [[]	Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
		 a. [] Computer Readable Form b. [] Specification Sequence Listing on: i. [] CD-ROM or CD-R (2 copies); or ii. [] paper c. [] Statements verifying identity of above copies
		ACCOMPANYING APPLICATION PARTS
10	[]	Assignment Papers (cover sheet & document(s))
11.	r 1	37 CFR 3.73(b) Statement [] Power of Attorney
		English Translation Document (if applicable)
		IDS with PTO/SB/O8A [] Copies of IDS Citations
14.	[]	Preliminary Amendment
		Return Receipt Postcard
16.	[]	Request and Certification for Non-Publication. Form PTO/SB/35 is attached.
17.	[]	Certified Copy of Priority Document(s) if foreign priority is claimed
18.	[]	Other:
		IF A CONTINUING APPLICATION, CHECK APPROPRIATE BOXES AND SUPPLY THE REQUISITE INFORMATION
19.		Continuation [] Divisional [] Continuation-in-Part of prior application No.:
	[]	Complete Application based on provisional Application No
Pric	or a	pplication information: Examiner: Group Art Unit:

CORRESPONDENCE ADDRESS

20. Correspondence Address: Customer Number 321 Attention: Christopher M. Goff

Respectfully submitted,

Christopher M. Goff, Reg. No. 41,785

CMG/dmt

FEE TRANSMITTAL

Application Number To Be Assigned Filing Date September 11, 2003 nventor(s) Krzysik, et al. Attorney Docket Number KCC 4953 (18,752) METHOD OF PAYMENT The Commissioner is hereby authorized to charge the [] indicated fees to Deposit Account No. 19-1345. The Commissioner is hereby authorized to charge any additional fees required under 37 CFR 1.16 and 1.17 to Deposit Account No. 19-1345. [] Applicant claims small entity status. [X] Check Enclosed. The Commissioner is hereby authorized 2. to charge any under payment or credit any over payment to Deposit Account No. 19-1345. FEE CALCULATION BASIC FILING FEE Subtotal (1) \$ 750.00 1. [X] (Type: <u>Utility</u>) EXTRA CLAIM FEES Subtotal (2) \$ 774.00 2. [X]Total Claims 63 Independent Claims 3 Multiple Dependent Claims 3. ADDITIONAL FEES Subtotal (3) \$_ Surcharge - late filing fee or oath Surcharge - late provisional filing fee or cover sheet Extension for reply within _____ month Notice of Appeal Filing a Brief in Support of an appeal Request for ex parte Reexamination [] Petitions to the Commissioner [] Submission of Information Disclosure Statement [] Recording each patent assignment per property [] Request for Continued Examination Other:

TOTAL AMOUNT OF PAYMENT \$ 1,524.00

Christopher M. Goff, Reg. No. 41,785

Date

CMG/dmt

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